## **Special Event Parade Questionnaire Attachment D**

Licensing Office 55 North Center Street Mailing Address: PO Box 1466 Mesa, Arizona 85211-1466 480-644-2316 Telephone 480-644-3999 Fax www.mesaaz.gov



## **PARADE OUESTIONNAIRE**

1.	Date of parade		
2.	Start time of parade	ne of paradeCompletion time of parade	
3.	Location of proposed assembly area		
	Assembly start time		
4.	Have arrangements been made for traffic control (barricading and/or police officers)		
	☐ Yes ☐ No	If yes, please explain	
	•	ments be made?	
5.	Attach map of parade route		
6.	Indicate the starting point, proposed travel route and the termination point.		
7.	During the event will you occupy all or a portion of the streets?		
8.	Approximate number of persor	s, animals and vehicles, which will constitu	te the event.
	Number of people		
	Number of animals	Type of animals	
	Number of vehicles	Type of vehicles	
9.		Type of vehiclese for emergency medical personnel?	
9.	Have arrangements been made		☐ Yes ☐ No
	Have arrangements been made If no, when do you expect the	e for emergency medical personnel?	☐ Yes ☐ No
	Have arrangements been made	e for emergency medical personnel?	☐ Yes ☐ No
	Have arrangements been made If no, when do you expect the	e for emergency medical personnel?	☐ Yes ☐ No
	Have arrangements been made If no, when do you expect the	e for emergency medical personnel?	☐ Yes ☐ No
	Have arrangements been made If no, when do you expect the	e for emergency medical personnel?	☐ Yes ☐ No
10	Have arrangements been made If no, when do you expect the Other pertinent information	e for emergency medical personnel? arrangements to be completed?	☐ Yes ☐ No
10	Have arrangements been made If no, when do you expect the Other pertinent information	e for emergency medical personnel?	☐ Yes ☐ No
10 E:	Have arrangements been made If no, when do you expect the Other pertinent information  If street closures and/or police	e for emergency medical personnel? arrangements to be completed?	☐ Yes ☐ No
O E:	Have arrangements been made If no, when do you expect the Other pertinent information	e for emergency medical personnel? arrangements to be completed?	☐ Yes ☐ No